## SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 5705 / 9067 (check only one)    X
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Full Name (Last, First, Middle Initial) MR. ROBERT J. MULLER, SR.  Mailing Address 16-13 SPLIT ROCK R  City FAIR LAWN  FEC ID number of contributing federal political committee.  Name of Employer RETIRED  Receipt For: Primary General Other (specify)	State Zip Code NJ 07410-4401  C  Occupation RETIRED  Aggregate Year-to-Date   500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) MR. ROBERT J. MULLER, SR.  Mailing Address 16-13 SPLIT ROCK R  City FAIR LAWN  FEC ID number of contributing federal political committee.  Name of Employer RETIRED  Receipt For: Primary General Other (specify)	OAD  State Zip Code NJ 07410-4401  C  Occupation RETIRED  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) TEDDY MULLENNIX  Mailing Address 3845 PEACHY CANYO  City PASO ROBLES  FEC ID number of contributing federal political committee.  Name of Employer ENNIX INCORPORATED  Receipt For: Primary General Other (specify)	State Zip Code CA 93446-9691  C  Occupation EXECUTIVE  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		750.00